

Guide for Boards of Health: Exclusions and Restrictions for Food Employees and Applicants

Health Status	Facilities Serving Highly Susceptible Population	Facilities Not Serving Highly Susceptible Population
1. Diagnosed with illness due to <i>Salmonella</i> Typhi, <i>Shigella</i> spp., <i>Escherichia coli</i> O157:H7, or Hepatitis A Virus	Exclude 590.003(D)(1)	Exclude 590.003(D)(1)
2. Experiencing a symptom listed in 2-201.11(B)(1): diarrhea, fever, vomiting, sore throat w/fever, open sore	Restrict 590.003(D)(2)(a)	Restrict 590.003(D)(2)(a)
3. Experiencing a symptom listed in 2-201.11(B) (1) and meets high-risk condition of 2-201.11(D)(1)-(3)	Exclude 590.003(D)(3)(a)	Restrict 590.003(D)(2)(a)
4. Asymptomatic, but stools positive for <i>S. Typhi</i> , <i>Shigella</i> spp., or <i>E. coli</i> O157:H7 or diagnosed with Hepatitis A	Exclude 590.003(D)(1)	Exclude 590.003(D)(1)
5. Asymptomatic, but is diagnosed with an infectious agent specified in 590.003(C)(5)-(14)	Exclude 590.003(D)(3)(b)	Restrict 590.003(D)(2)(b)
6. Past illness from <i>Salmonella</i> Typhi within the last 3 months	Exclude 590.003(D)(3)(c)	Exclude 590.003(D)(1)
7. Past illness from <i>Shigella</i> spp. or <i>E. coli</i> O157:H7 within the last month	Exclude 590.003(D)(3)(d)	Exclude 590.003(D)(1)
8. Past illness with disease caused by infectious agent specified in 590.003(C)(5)-(14) within the last month	Exclude 590.003(D)(3)(b)	Restrict 590.003(D)(2)(b)
9. Onset of jaundice within the last 7 days	Exclude 590.003(D)(4)(a)	Exclude 590.003(D)(4)(a)
10. Onset of jaundice more than 7 days ago	Exclude 590.003(D)(4)(b)(1)	Restrict 590.003(D)(4)(b)(2)
11. Experiencing persistent sneezing, coughing, runny nose that causes discharges from the eyes, nose or mouth	Restrict 2-401.12	Restrict 2-401.12

Removal of Exclusions & Restrictions for Food Employees and Applicants

Health Status	Facilities Serving Highly Susceptible Population	Facilities Not Serving Highly Susceptible Population
<p>1. Diagnosed with Illness due to <i>Salmonella</i> Typhi, <i>Shigella</i> spp., <i>Escherichia coli</i> O157:H7, or Hepatitis A virus</p> <p>Exclude</p>	<p>590.003(E)(1)</p> <p>(a) Written medical documentation to BOH that person is free of infectious agent as specified under 590.017 AND (b) RA* Approval</p>	<p>590.003(E)(1)</p> <p>(a) Written medical documentation to BOH that person is free of infectious agent as specified under 590.017 AND (b) RA Approval</p>
<p>2. Experiencing a symptom listed in 2-201.11(B)</p> <p>Restrict</p>	<p>590.003(E)(2)</p> <p>(a) No illness results: no symptoms OR (b) If suspect cause of illness: (1) Free of symptoms, AND (2) written medical documentation to BOH that person is free of disease as specified under 590.017 AND (3) RA Approval OR (c) Written medical documentation that symptoms experienced are due to noninfectious condition</p>	<p>590.003(E)(2)</p> <p>(a) No illness results: no symptoms OR (b) If suspect cause of illness: (1) Free of symptoms, AND (2) written medical documentation to BOH that person is free of disease as specified under 590.017 AND (3) RA Approval OR (c) Written medical documentation that symptoms experienced are due to noninfectious condition</p>
<p>3. Experiencing a symptom listed in 2-201.11(B)(1) and meets a high risk condition 2-201.11(D)(1)-(3)</p> <p>HS Pop: Exclude Gen Pop: Restrict</p>	<p>590.003(E)(4)</p> <p>(a) Written medical documentation to BOH that (1) person is free of the infectious agent of concern as specified under 590.017 OR (2) free of jaundice as specified under 590.003(E)(5) if hepatitis A is the agent of concern OR (b) Written medical documentation that symptoms experienced are due to noninfectious condition AND (c) RA Approval</p>	<p>590.003(E)(2)</p> <p>(a) No illness results: no symptoms OR (b) If suspect cause of illness: (1) Free of symptoms, AND (2) written medical documentation to BOH that person is free of disease as specified under 590.017 AND (3) RA Approval OR (c) Written medical documentation that symptoms experienced are due to noninfectious condition</p>
<p>4. Asymptomatic but stools positive for <i>S. Typhi</i>, <i>Shigella</i> spp., or <i>E. coli</i> O157:H7</p> <p>Exclude</p>	<p>590.003(E)(1)</p> <p>(a) Written medical documentation to BOH that person is free of infectious agent as specified under 590.017 AND (b) RA Approval</p>	<p>590.003(E)(1)</p> <p>(a) Written medical documentation to BOH that person is free of infectious agent as specified under 590.017 AND (b) RA Approval</p>
<p>5. Asymptomatic but is diagnosed with an infectious agent specified in 590.003(C)(5)-(14)</p> <p>HS Pop: Exclude Gen Pop: Restrict</p>	<p>590.003(E)(4)</p> <p>(a) Written medical documentation to BOH that person is free of infectious agent of concern as specified under 590.017 AND (c) RA Approval</p>	<p>590.003(E)(3)</p> <p>(a) Written medical documentation to BOH that person is free of infectious agent of concern as specified under 590.017 AND (b) RA Approval</p>

* RA = Regulatory Authority

Health Status	Facilities Serving Highly Susceptible Population	Facilities Not Serving Highly Susceptible Population
<p>6. Past illness from <i>Salmonella</i> Typhi within the last 3 months</p> <p>HS Pop: Exclude Gen Pop: Exclude</p>	<p>590.003(E)(4)</p> <p>(a) Written medical documentation to BOH that person is free of infectious agent of concern as specified under 590.017</p> <p>AND</p> <p>(c) RA* Approval</p>	<p>590.003(E)(1)</p> <p>(a) Written medical documentation to BOH that person is free of infectious agent of concern as specified under 590.017</p> <p>AND</p> <p>(b) RA Approval</p>
<p>7. Past illness from <i>Shigella</i> spp., or <i>E. coli</i> O157:H7 within last month</p> <p>HS Pop: Exclude Gen Pop: Exclude</p>	<p>590.003(E)(4)</p> <p>(a) Written medical documentation to BOH that person is free of infectious agent of concern as specified under 590.017</p> <p>AND</p> <p>(c) RA Approval</p>	<p>590.003(E)(1)</p> <p>(a) Written medical documentation to BOH that person is free of infectious agent of concern as specified under 590.017</p> <p>AND</p> <p>(b) RA Approval</p>
<p>8. Past illness with disease caused by infectious agent specified in 590.003(C)(5)-(14) within the last month.</p> <p>Hs Pop: Exclude Gen Pop: Restrict</p>	<p>590.003(E)(4)</p> <p>(a) Written medical documentation to BOH that person is free of infectious agent of concern as specified under 590.017</p> <p>AND</p> <p>(c) RA Approval</p>	<p>590.003(E)(3)</p> <p>(a) Written medical documentation to BOH that person is free of infectious agent of concern as specified under 590.017</p> <p>AND</p> <p>(b) RA Approval</p>
<p>9. Onset of jaundice within last 7 days</p> <p>Exclude</p>	<p>590.003(E)(5)</p> <p>(a) Person must provide written medical documentation that they are free of Hepatitis A as specified under 590.017(B)(4)</p> <p>AND</p> <p>(b) RA approval</p> <p>Note: Cannot remove exclusion until it has been at least 7 days since the onset of jaundice.</p>	<p>590.003(E)(5)</p> <p>(a) Person must provide written medical documentation that they are free of Hepatitis A as specified under 590.017(B)(4)</p> <p>AND</p> <p>(b) RA approval</p> <p>Note: Cannot remove exclusion until it has been at least 7 days since the onset of jaundice.</p>
<p>10. Onset of jaundice more than 7 days ago</p> <p>HS Pop: Exclude Gen Pop: Restrict</p>	<p>590.003(E)(5)</p> <p>(a) Person must provide written medical documentation that they are free of Hepatitis A as specified under 590.017(B)(4)</p> <p>AND</p> <p>(b) RA approval</p>	<p>590.003(E)(5)</p> <p>(a) Person must provide written medical documentation that they are free of Hepatitis A as specified under 590.017(B)(4)</p> <p>AND</p> <p>(b) RA approval</p>

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